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Bib Data Sheet

CONFIRMATION NO. 1313

SERIAL NUMBER 10/826,618	FILING DATE 04/16/2004  RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. P-21057.00
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*mk*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*mk*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 06/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>mk</i>	STATE OR COUNTRY MN	SHEETS DRAWING 8	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
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ADDRESS  
 27581  
 MEDTRONIC, INC.  
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TITLE  
 Automated template generation algorithm for implantable device

FILING FEE  RECEIVED 1040	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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